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| <p>Date: _____</p> <p>Approved as conforming to court order:</p> <p>_____</p> <p style="text-align: center;">(TYPE OR PRINT NAME)</p> | <p style="text-align: center;">_____
JUDICIAL OFFICER</p> <p style="text-align: center;">▶</p> <p style="text-align: center;">_____
SIGNATURE OF ATTORNEY FOR</p> <table border="0" style="width: 100%;"><tr><td style="width: 15%; text-align: center;"><input type="checkbox"/></td><td>PETITIONER//PLAINTIFF</td></tr><tr><td style="text-align: center;"><input type="checkbox"/></td><td>RESPONDENT/DEFENDANT</td></tr><tr><td style="text-align: center;"><input type="checkbox"/></td><td>OTHER PARENT</td></tr></table> | <input type="checkbox"/> | PETITIONER//PLAINTIFF | <input type="checkbox"/> | RESPONDENT/DEFENDANT | <input type="checkbox"/> | OTHER PARENT |
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| <input type="checkbox"/> | RESPONDENT/DEFENDANT | | | | | | |
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